SUBMIT: <u>COMPLETED</u> APPLICATION, TAX Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

Date Shape (Secrifical) E | W | JUN 2 4 2013 m

Refund:		Date:	Permit #:	
	62478	7-1-13	13.016.7	1113

Owner(s): M 1 (If there are Multiple Owners list	Bayfield Lounty reaso	Hecco of State of Sta			Municipal Use		☐ Commercial Use			Residential Use		Proposed Use	Proposed Construction:	Existing Structure: (If permit be	- Property	☐ Run a Business on	Conversion Relocate (existing bidg)	<u></u>	material □ New Construction	Value at Time of Completion *include donated time & (What are you applying for)	□ Non-Shoreland	XShoreland → V Is Property	0 🗆	Section $\frac{24}{}$, Township	Wt	LegalD	Authorized Agent: (Person Signing Application	Contractor:	2005 1005	Owner's Name:	DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICAME/IIIGIG CO.	A mark to to Rayfield Coun
isted on the Dese All-Owners dust sign or letter(s)	E 9 5 8	Conditional Use: (explain) Other: (explain)	Special Use: (explain)	Accessory Building Addition/Alteration (specify)	Addition/Alteration (specify)	Bunkhouse w/ (sanitary, or seeping quarters, Mobile Home (manufactured date)	with Attached Garage	with (2 nd) Deck	with (2 nd) Porch	with Loft with a Porch	Residence (i.e. cabin, hunting shack, etc.	Proposed Structure (first structure on property)		(if permit being applied for is relevant to it)			existing bldg)	teration "	struction 🛘 1-Story	# of Staries applying for) and/or basement		Lake	☐ Is Property/Land within 300 feet of River, Stream (ind. Intermittent) Creek or Landward side of Floodplain? If yescontinue →	$_{0}$ $\frac{47}{4}$ N, Range $\frac{9}{4}$ W	a Gov't Lot Lot(s) CSM	(Use Tax Statement) 04-	on behalf of Owner(s))	Contra	lakera	M	PERMITS HAVE BEEN ISSUED TO APPLICATE X LAND USE SANITARY	h. 7aning Denartment.
of authorization must	FAILURE I U UB I AIN A PERMIT 21 STANLING CONSTRUCTION 100 PM 100 P	DELMO CONSCIDENCIANI MITHOLITA DERM	Lange	Alteration (specify)	Deck	or 🗆 cooking					shack, etc.)	Proposed Structure	Length:			X None	1 1	Year Round □ 2		Use of bedrooms	97 P. D. D. G. C.	Property of the struct of the	If yescontinue> Distance Structure	Town of: Highes	Vol & Page	447	5773		ver WI	ess: City/s	NYTIGIC CO. ZOWNY BOUTHIS API	
any this app	wedge and belief it is true, correct and completely in determining whether to issue a permit nty officials charged with administering count	T WILL RESULT IN PENALTIES (XX	(x	(×	(30 ×		ford soon facilities (X	(x	××	(X	× ×	Dimensions X	Width:		Nene	☐ Portable (w/service contract) ☐ Compost Toilet	Privy (Pit) or 1	Sanitary (Exists) Specify Type:	Municipal/City	What Type of Sewer/Sanitary System Is on the property?		Distance Structure is from Shoreline:	is from Shoreline : feet	Lot Size	Block(s) No. Subdivision:	SCOZ Volume 1002	1년 왕		77	tate/Zip: Zww River WS 5484	SPECIAL USE	
-30.1	ct and complete. I (we) acknowledge that I (we) ue a permit. I (we) further accept liability which stering county ordinances to have access to the)		(%)))))							_	Square	Height:	\$		/aulted (min 200 gallon)	A		В			Is Property in Are Wetland Floodplain Zone? Present?	20.16		. I ~	Written Auth Attached Yes Dropert	Plumber Phone:	Cell Phone:	Telephone: 115	OTHER	

If you recently purchased the prop

Attach
Copy of Tax Statement
Froperty send your Recorded Deed

Date

Authorized Agent:

¥

While Kigning on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit

Date of Approval:	Date of A	Hold For Fees:		Hold For Affidavit:		hold For TBA:	Miles	Signature of Inspector:
		hed.)	—(If <u>No</u> they need to be attached.)	₹,	∏Yes	J Conditions Atta	Committee or	Condition(s)
t (<i>KRB</i>) ation (<i>a</i>)	Zoning District (, Lakes Classification (, Date of Re-Inspection		127		Inspected by:			Inspection Record: Metad Date of Inspection:
Z No ON □	er Maryes bd ⊡Yes	Were Property Lines Represented by Owner Was Property Surveyed	Were Property Line			i Xiyes □ No i Xiyes □ No	Was Parcel Legally Created Was Proposed Building Site Delineated	Was Propo
	Case #:		Previously Granted by Variance (B.O.A.)				"	Granted by V
ed □Yes XNo	Affidavit Required Affidavit Attached	□Yes Ø*No	Mitigation Required Mitigation Attached	No on s	d) ious Lot(s))	es (Deed of Record) es (Fused/Contiguous Lot(s)) es	Is Parcel a Sub-Standard Lot Yes Is Parcel in Common Ownership Yes Is Structure Non-Conforming Yes	Is Parce Is Parcel In C
			6	Denial:	Reason for Denial: Permit Date:		enied (Date): 130/67	Permit Denied Permit #: 13
	Sanitary Date:	t of bedrooms:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mber:	Sanitary Number:	se Only)	Issuance Information (County Use Only)	Issuance I
), and <u>Well (</u> W). de.	ank (HT), Privy (P), and some second	n field (DF), Holding Te Construction or Use ha ired To Enforce The Uni so require permits.	Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W). NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.	onstruction, (1) Year from welling: ALL ity, State or I	n(s) of New C its Expire One Two Family D own, Village, C	posed Location Land Use Perm Gr New One & The local To	(9) Stake or Mark Pro NOTICE: A For The Construction	
ack must be measured must be visible from opposed site of the structure, or must be	ack must be opposed site of	the boundary line from which known corner within 500 feet.	the minimum required setback, e of a corrected compass from a	ty (30) feet from	wher's expense. It but less than thir verifiable by the D	Ised surveyor at the ormore than ten (10) fee more than ten (corner, or ly surveyed corner, or s.	other previously surveyed corner or marked by a licensed surveyor at the owner's expense. Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setbone previously surveyed corner to the other previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the promarked by a licensed surveyor at the owner's expense.	other previously so other previously so Prior to the place one previously su marked by a licen
		don't is from this the nother language to record near the sist		Feet	NA	ig)	Privy (Portable, Compostin	Setback to P
₩Å Feet			Setback to Well	Feet	NA	ık	eptic Tank or Holding Tank	Setback to Septic
NIA Feet		plain	Elevation of Floodplain	Feet	tho+	¥	Setback from the East Lot Line	Setback fron
NA Feet		land Slope Area	Setback from Wetland Setback from 20% Slop	Feet Feet	NA NA	bun ka.	Setback from the North Lot Line be Setback from the South Lot Line contains the West Lot Line contains	Setback fron Setback fron
NH Feet	ater mark)	Setback from the River, Stream, Creek Setback from the Bank or Bluff	Setback from the F	Feet	+ 48 C	F-Way	/ ≌ ≳	Setback fron
							Dr.Sci Pinon	
ed by the Planning & Zoning Dept. Weasurement		Changes in plans must be approv	Char		st point)	ed to the close	(8) Setbacks: (measured to the closest point)	
9 1					ng)	prior to continui	Please complete (1) - (7) above (prior to continuing)	Please co
				Se Se	attached	å V		
	ıd/or (*) Privy (P)	Holding Tank (HT) an	All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%	on your Proj : Tank (ST); (: Trank (ST); (: Stream/Cree : Stream/Cree	g Structures W); (*) Septic (*) River; (*) Sends; or (*) Sk		(4) Show: (5) Show: (6) Show any (*): (7) Show any (*):	
		2	North (N) on Plot Plan ** Oriveway and /** Frontage Road (Name Frontage Road)	ontage Boa	North (N) on Plot Plan		(2) Show / Indicate: (3) Show I postion of (*).	

